

Non-Employee Travel Form

PART 1: Travel Pre-Approval

Traveler Name: _____ Dates of Travel: _____

Reason for Travel: _____

How Does Travel Support Strategic Direction: _____

Vehicle Rental Needed: Yes No

If Yes, justification for rental: _____

APPROVED: _____

Travel Coordinator

Ext.

Control Agent

PART 2: Reimbursement

Vendor Code: _____

- Notes to Traveler:**
- ◆ A completed Form W-9 must be submitted to Purchasing Department prior to reimbursement
 - ◆ Original itemized receipts are required for **all** expenses

Date																						Total	
Lodging																							
Food																							
Breakfast																							
Lunch																							
Dinner																							
Other																							
Other																							
Subtotal																							
Food Reimbursed																							
Airfare																							
Luggage																							
Car Rental																							
Parking																							
Other / Tips																							
TOTAL																						\$	

Mileage: _____ miles at \$0.32 per mile = \$ _____

Cost Account: _____ - _____ - _____ Total to be Reimbursed = \$ _____

Submitted By: _____
Traveler

Approved By: _____
Vice President/President

Approved By: _____
Control Agent

Pre-Audit By: _____
Business Office